

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Gordon D. Ross (deceased)
Application No.: 10/526,185 Group: 1614
371(c) Date: August 3, 2005 Examiner: Craig D. Ricci
Confirmation No: 6460
For: CANCER THERAPY USING BETA GLUCAN AND ANTIBODIES

CERTIFICATE OF MAILING OR TRANSMISSION	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or is being facsimile transmitted to the United States Patent and Trademark Office on:	
_____	_____
Date	Signature

Typed or printed name of person signing certificate	

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment for filing in the above-identified application.

- ☒ Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.
- ☐ A Small Entity Statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.

The claims fee has been calculated as shown below:

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA
TOTAL	8	MINUS	* 20	0
INDEP	4	MINUS	** 6	0
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				

* not fewer than 20
** not fewer than 3

SMALL ENTITY	
RATE	ADDIT. FEE
X \$26	\$
X \$110	\$
+ \$195	\$
TOTAL = \$ 0	

OR

OTHER THAN SMALL ENTITY	
RATE	ADDIT. FEE
X \$52	\$
X \$220	\$
+ \$390	\$
TOTAL = \$ 0	

The Application Size Fee has been calculated as shown below:
(Effective for cases filed on or after December 8, 2004)

Actual Sheets (Including current amendment)	Highest No. of Sheets Paid For (At least 100)	No. of Additional Units Required (Increments of 50 sheets)
93	100	0

SMALL ENTITY	
Rate	Total Amount Owed
X \$135	\$[]

OTHER THAN SMALL ENTITY	
Rate	Total Amount Owed
X \$270	\$[]

Payment Sufficient for up to
100 Sheets

Petition for Extension of Time

- ☒ Applicant hereby petitions to extend the time to respond to the Office Action dated April 15, 2009 for three months from July 15, 2009 to October 15, 2009. The appropriate fee is set forth below.
- ☐ *[For action-specific language in an extension of time, select the appropriate option from the Firm Templates]*

Please charge Deposit Account No. 08-0380 for the following fees:

<input checked="" type="checkbox"/>	Petition for three month Extension of Time	\$ 555.00
<input type="checkbox"/>	Claims Fee	\$ _____
<input type="checkbox"/>	Application Size Fee	\$ _____
<input type="checkbox"/>	Other Fees:	_____
		\$ _____
		\$ _____
	TOTAL:	\$ 555.00

A check is enclosed in payment of the following fees:

<input type="checkbox"/>	Petition for [] month Extension of Time	\$ _____
<input type="checkbox"/>	Claims Fee	\$ _____
<input type="checkbox"/>	Application Size Fee	\$ _____
<input type="checkbox"/>	Other Fees:	_____
		\$ _____
		\$ _____
	TOTAL:	\$ _____

☒ Please charge any deficiency or credit any overpayment in the fees that may be due in this matter to Deposit Account No. 08-0380.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By Pamela A. Torpey
 Pamela A. Torpey
 Registration No.: 45,736
 Telephone (978) 341-0036
 Facsimile (978) 341-0136

Concord, Massachusetts 01742-9133

Dated: October 15, 2009